Disclosure Re	eport Cover				Amendment  Yes No
	meral report and committee i	nformation, must b	e signed and sul	bmitted along with	, _
	n to update information				
1. Committee Info	rmation				
a. Full Name					c. ID Number
Committee to Elect	Mike Woodard				20-2892994
	lude City, State and Zip Code)				d. Date Filed
PO Box 1032 Durham, NC 27702	2		01/12/10		
					e. Phone Number
					919.599.5143
2. Report Year	3. Period Start Date (mm/s	4. Period (mm/dd/vv	End Date	5. Treasurer F	
2009	10/20/09	12	2/31/09	Michael S. Wil	son
6. Type of Commit	tee (Check One)	9. Type of Repor	t (check or	nly one type of rep	ort from one category)
Candidate Camp	paign Party	Municipal		County	Referendum
PAC	Referendum	Organization	al	Organizational	Organizational
Independent Expenditure Legal Expense 1	Joint Fundraiser	Thirty-five d	ay	Quarterly	Pre-referendum
7. Type of Fund	(if applicable, check one)	Pre-primary		First	Final
"Booster Fund"	10 15	Pre-election		Second	Supplemental Final
Building Fund		Pre-runoff		Third	Annual
		Semi-annual		Fourth	Special
		Mid Ye		Semi-annual	10 Carriel Depart Name
Other		Year Er	1십	Mid Year	10. Special Report Name
		Final Pinal		Year End Final	
8. Number of Fund	o	Special		Special	
11. Account Inform			11. Account	Information	
a, Financial Institution			a. Financial Ins	stitution Full Name	
SunTrust Bank					
b. Purpose	c. Account Code		b. Purpose		c. Account Code
Campaign					
Account	d. Period Begin Balanc	e			d. Period Begin Balance
	S 1005.14				\$
	3 7000111				
the NC General Sta is complete, the tu	ministee or Funds in completutes and that ho had are considered and that I have been bringed Name of Suther	ommingled with pro n trained by the NC	hibited or other	non-disclosed fur Elections /	2B, & 22D-22M of Chapter 163 of ods. I further certify that this report
FOR OFFICE USE	ONLY	A SHARE THE PARTY OF THE PARTY		210	Delivery Method
Date Received	1/12/11	Employee	m.0	0.00	Normal Mail Registered Mail
Date Postmark	ed:	Employee	ECE	<b>AED</b>	Hand Delivered Electronically Filed
Date Scanned:		Employee	JAN 12	2010	Signer has not received mandatory training
Date Data Ente		Employee	A 74	2010	manowory duming
DI NIAME	· 6	and committee No		Ziller amilia a	dress treasurer assistant treasurer.

Please Note: This form cannot be used to amend committee. If time tion such as the current of custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

CRO-1000

## **Detailed Summary**

Use this form to summarize all disclosure reporting forms and to total monetary information.

I. Committee Full Name (and Fund if applicable) 2. Type of Report 3. ID Number Committee to Elect Mike Woodard Pre-Election 20-2892994 Total thia Total this Start of Election Cycle: 2009 January 1. Reporting Period Election Cycle Cash on Hand at Start 1005.14 155.14 S 2 RECEIPTS 350.00 5) Aggregated Contributions from Individuals (CRO-1205) 150.00 650.00 \$ 1500.00 6) Contributions from Individuals (CRO-1210) Š 7) Contributions from Political Party Committees \$ (CRO-1220) 5 Contributions from Other Political Committees 0:00 S 150:00 8) (CRO-1230) \$ 9) Loan Proceeds (CRO-1410) 10) Refunds/Reimbursements To the Committee (CRO-1240) S 11) Other Receipt Sources 5 11a) Interest on Bank Accounts (CRO-1250) S 11b) Contributions from Not-for-Profit Organizations (CRO-1250) S 11c) Outside Sources of Income (CRO-1250) 11d) Legal Expense Fund - Other Sources (CRO-1270) S s (CRO-1265) 11 e) Exempt Purchase Price Sales S 2155.14 800.00 TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) 12) EXPENDITURES 13) Disbursements (CRO-1310) S 13a) Operating Expenditures Š \$50.00 0.00 (CRO-1310) 13b) Contributions to Candidates/Political Committees S (CRO-1310) 13c) Coordinated Party Expenditures S 14) Aggregated Non-Media Expenditures (CRO-1315) (CRO-1420) 2 15) Loan Repayments S 16) Refunds/Reimbursements From the Committee (CRO-1320) \$ 17) In-Kind Contributions (CRO-1510) 350.00 0.00 Ś TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) \$ 18) \$ 00.008 1805.14 Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) 19) ADDITIONAL INFORMATION Non-Monetary Gifts Given to Other Committees (CRO-1330) 20) Outstanding Loans (incl. ones from other campaigns) (CRO-1430) 21) 22) Debts and Obligations owed By the Committee (CRO-1610) Debts and Obligations owed To the Committee 23) 24) Account Transfers Within the Committee (CRO-1720) CRO-DAN \$ 2 2010 S 25) Administrative Support 5 26) Forgiven Loans S 48-Hour Notice Reports Sum \$ Contributions to be Refunded (CRO-1215) 28)

Amendment

## **Aggregated Contributions from Individuals**

Page

Yes 🛛 No

Amendment

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable)

Com	20-282994					
3. Cor	tributor Info	rmation	THE RESERVE			ALCOHOL: THE
a. Ame		b. Account Code	c. Form of Payment	d. In-Kind Description	c. Date (mm/dd/vvvv)	f. Amount
	Add	1057	Check		10/26/09	\$ 50.00
	Remove	1037	Clictx		10/20/07	\$ 50.00
	1 Add 3106	Check		10/27/09	\$ 50.00	
	Remove	1				
	Add	9018081071			10/28/09	\$ 50 00
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H	Remove	-				\$
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H	Add			JAN 12	2010	0
	Remove			IN DO		\$
	Add			IN PER	RONE	S
	Remove			RECE JAN 12 IN PEF	1001/	ت ا
4. Total only this Page \$ 20						
5. Total of ALL CRO-1205 Pages						
		ne 5 of Detailed Summ			\$	200.00

Amendment Contributions from Individuals  $\square$ Yes No Pg Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used 1. Committee Full Name (and Fund if applicable) 2. ID Number Committee to Elect Mike Woodard 20-2892994 Add Remove 3. Contributor Information b. Job Title/Profession d. Comments a. Full Name, Mailing Address & Phone President (include city, state, & zip) Michael W. Shiflett c. Employer's Name/Specific Field 1308 Broad Street American LAbor Durham, NC 27705 e. Election Sum to Date 100.00 j. Date (mm/dd/yyyy) k. Amount i. In-Kind Description £ Prior g. Account Code b. Form of Payment \$ 100.00 10/14/09 Check \$ S 3. Contributor Information Remove Add a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments (include city, state, & zip) Attorney Lewis A. Cheek c. Employer's Name/Specific Field 5500 Old Brandt Trace K&L Gates Greensboro, NC 27455 e. Election Sum to Date \$ 100.00 k. Amount i. In-Kind Description j. Date (mm/dd/yyyy) h. Form of Payment f. Prior g. Account Code \$ 100.00 10/21/09 Check \$

					\$		
3. Contr	ributor Informati	00	☐ Add ☐ Remove				
a. Full Na	me, Mailing Address	& Phone	b. Job Title/Profession	d. Commen	mments		
(include	(include city, state, & zip) Small Business Owner						
Jason C.	Watson						
2404 Edgemont Road Wendell, NC 27591			c. Employer's Name/Specific Field				
			Self-Employed				
				e. Election S	e. Election Sum to Date		
				\$	100.00		
f. Prior	2. Account Code	h. Form of Payment	i. In-Kind Description j. Date (mm.	/dd/yyyy)	k. Amount		
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4. Total only this Page IN PERC

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\$

5. 10 10 PARTE NO-1210 Pages

Ord Detailed Summary Page CHO-1100

					Amen	ament		
Contributions from Individuals	Pg	_2	of	2		Ves	$\boxtimes$	No
Lies this form to report individual contributions over \$50 or contribu	riona un don	CEA IF FOR	CDA	1205 in me	st mand			

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)						2. ID Number					
Committ	tee to Elect Mike \	Woodard							20-2892994		
3. Contributor Information						Remo	ove				
a, Full Name, Mailing Address & Phone				b. Job 7	Citie/Proi	lession		d. Commen	its		
(include city, state, & zip)			Attorney								
William	J. and Leigh Brian			Research Analyst							
	ntry Club Drive			c. Empl	oyer's N	ame/Spec	rific Field	İ			
Durham,	NC 27712			K&L Gates							
				Duke	Medica	ıl Centei	r	e. Election Sum to Date			
							\$ 100.00				
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Descr	iption		j. Date (mm/dd/y3	уу)	k. Amount		
		Check					10/27/	09	\$	100_00	
									\$		
									\$		
3. Contr	ibutor Informatio	on		Add		Remo	ove		900		
a. Full Na	me, Mailing Address	& Phone		b. Job T	Citle/Prof	ession		d. Commen	ts		
(include	city, state, & zip)			Presid	lent						
John L. A	Atkins III			Archit	tect						
PO Box	12037					ame/Spec	ific Field				
Research	Triangle Park, N	€ 27709		O'Brie	en Atkii	18					
								e. Election Sum to Date			
							\$ 250.00				
f. Prior	g. Account Code	h. Form of Payment	i. ln-l	Kind Descr	ription		j. Date (mm/dd/yy	уу)	k. Amount		
		Check					10/30/	09	\$ 250.00		
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	me, Mailing Address			b. Job Title/Profession				d. Comments			
(include	city, state, & zip)										
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	of ALL CRO							\$		650.00	
		Detailed Summary Page C	RO-1100	)	+			,		050 00	

## Disbursements

Pg <u>1</u>

of <u>1</u>

Amendment
Yes

No

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee ]	Full Name (and Fun	d if applicable)			2. ID Number			
Committee to I	Elect Mike Woodard				20-2892994			
3. Type of Dist	ursement (Plea	se use separate (	RO-1310 forms for each	h type of Disburse	ment.)			
Operating:			ndidates/Political Committees		Coordinated Party Expenditures			
4. Payee Inform	nation	- 71	Add	Remove	No.			
_	ling Address & Phone	- Ind	b. Coordinated Committee	M	d. Comments			
finelude city, state	, & zip)							
			c. Level Registered (Speci	ifv)	-			
			Federal	County				
			State F	Municipality	e. Election Sum to Date			
			State	Widinorpanty	C. Diccion State to Date			
					\$			
	T	h. Purpose Code	Li Data (mm/dd/mm/)	j. Amount	k. Required Remarks			
f. Account Code	g. Form of Payment	n. r ut pose Code	i. Date (mm/dd/yyyy)	J. Autouat	R. Required Remarks			
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4. Payee Inform	nation		Add	Remove	Tio I			
q. Full Name, Mai	ling Address & Phone		b. Coordinated Committee	e Name	d. Comments			
finclude city, state	, & zip)							
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4. Payee Inform	mation	- 13	Add	Remove				
			b. Coordinated Committee	e Name	d. Comments			
	ling Address & Phone							
(include city, state	. & ZID)							
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E house to died:	a Form of Boument	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks			
f. Account Code	g. Form of Payment	n. 1 m post code	L Date (IIIII/Gd/yyyy)	J. Amount	ni redan ee seema ni			
				\$				
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			DEOF	115-				
			RECE	V-D	\$ 0.00			
5. Total only th	And a second sec			To Steel Band	3 0.00			
6. Total of AL	6. Total of ALL CRO-1310 Pages							
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating AANse\$) 2 2010 \$ 0.00 (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)								
(1 mis time goes in time 150 of Detailed Summary Page CNO-1100 if Continuo to Cumulations Continu								
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Continuation 1, 25 dilutes)								
7. Purpose Codes (List detailed expenditure code in (t.) above)  A* - Media R* - Printing C* - Fundraising D - To Another Candidate								
A* - Media	B* - Printing F* - Equipmen		ndraising iical Party		ing Public Office Expenses			
E - Salaries								
	I - Postage J - Penalties K* - Office Expenses O* - Other  * Codes require detailed explanation in required remarks field (k)							
- Codes requi	re detalied explanat	iva in required r	CHIMINS HEID (K)					